

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

1090
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 1/19/93

1/19/93
W/101 (b)

1/19/93

Instructions

- Print in ink or type
- Complete form and return with \$140 registration fee to the Board of Ethics, 2415 Quad Dr., 3rd Floor, Baton Rouge, LA 70806, (225) 763-8777 or
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME JOHN M. VANCE
Title President

2. BUSINESS NAME JOHN M. VANCE & CO.
Area Code and Phone Number (225) 763-8777

3. BUSINESS ADDRESS 105 St. Charles Avenue, New Orleans, LA 70130
Street and No. 105 St. Charles Avenue City New Orleans State LA Zip 70130

MAILING ADDRESS 105 St. Charles Avenue
Street and No. 105 St. Charles Avenue City New Orleans State LA Zip 70130

4. EMPLOYER JOHN M. VANCE & CO.

5. EMPLOYER'S ADDRESS 105 St. Charles Avenue, New Orleans, LA 70130
Street and No. 105 St. Charles Avenue City New Orleans State LA Zip 70130

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

7. Name JOHN M. VANCE John M. Vance & Co. Political Consultant

Address 105 St. Charles Avenue, New Orleans, LA 70130

Business or purpose Political Consultant, Political Action Committee

Does this person pay you? Yes

If No, who pays you? None

Lobbying Registration Form

Lobbyist's Registration Number

2. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

3. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

4. Name _____

Address _____

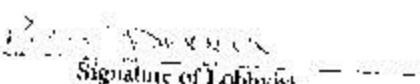
Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [USA-R.S. 24:50 et seq.] has been deliberately omitted.


Signature of Lobbyist